Amendments to the Claims

This listing of claims will replace all prior versions and listings of claims in the application:

- 1. (Currently amended) A method of treating a patient having an immunologic disorder autoimmune disorder, comprising:
 - (a) administering to the patient a therapeutically effective amount of an antibody that binds to SEQ ID NO:1 at least once or at one or more intervals of less than N weeks;
 - (b) temporarily discontinuing the administration of step (a) for *N* weeks or longer; and
- (c) repeating steps (a) and (b) at least once; wherein *N* is 8, 9, 10, 11, or 12.
- 2. (Original) The method of claim 1, wherein the administration of step (a) comprises an interval of 1, 2, 3, 4, 5, 6, or 7 weeks.
- 3. (Previously presented) The method of claim 1, wherein the antibody is administered in step (a) 2, 3, 4, 5, 6, or 7 times a week.
- 4. (Original) The method of claim 1, wherein the administration is discontinued in step (b) for 12, 18, 24, 30, 36, 42, 48 weeks or longer.
- 5. (Original) The method of claim 1, wherein at the beginning of the treatment the patient has one or more of:
 - (i) proteinuria of 1 g per a 24-hour period or higher;
 - (ii) serum creatinine levels of about 1 mg/dl or higher;
 - (iii) creatinine clearance levels of 97 ml/min or lower;
 - (iv) blood urea of 20 mg/dl or higher;
 - (v) abnormal titer of autoantibodies in the serum; and

- (vi) peripheral blood B cell count of 700 cells/µl.
- 6. (Original) The method of claim 5, wherein the patient is human.
- 7. (Withdrawn) The method of claim 1, wherein the therapeutically effective amount of the antibody is sufficient to inhibit autoantibody titer.
- 8. (Previously presented) The method of claim 1, wherein the therapeutically effective amount of the antibody is sufficient to reduce B cell hyperplasia.
- 9. (Withdrawn) The method of claim 1, wherein the therapeutically effective amount of the antibody is sufficient to reduce cardiac inflammation.
- 10. (Withdrawn) The method of claim 1, wherein the therapeutically effective amount of the antibody is sufficient to improve renal function.
- 11. (Withdrawn) The method of claim 10, wherein the renal function is one or more of: pressure filtration, selective reabsorption, tubular secretion, and systemic blood pressure regulation.
- 12. (Withdrawn) The method of claim 1, wherein the therapeutically effective amount of the antibody is sufficient to reduce progression of renal fibrosis.
- 13. (Withdrawn) The method of claim 1, wherein the therapeutically effective amount of the antibody is sufficient to reduce lymphocyte infiltration in the kidneys.
- 14. (Withdrawn) The method of claim 1, wherein the therapeutically effective amount of the antibody is sufficient to reduce lymphadenopathy.
 - 15. (Cancelled)

16. (Original) The method of claim 15 claim 1, wherein the autoimmune disorder is systemic lupus erythematosus.

17 - 30. (Cancelled)

- 31. (Previously presented) A method of reducing autoantibody titer in a patient, comprising:
 - (a) administering to the patient a therapeutically effective amount of an antibody that binds to SEQ ID NO:1 at least once or at one or more intervals of less than N weeks;
 - (b) temporarily discontinuing the administration of step (a) for *N* weeks or longer; and
- (c) repeating steps (a) and (b) at least once; thereby reducing autoantibody titer, and wherein N is 8, 9, 10, 11, or 12.
- 32. (Previously presented) A method of inhibiting generation of pathogenic B cells in a patient, comprising:
 - (a) administering to the patient a therapeutically effective amount of an antibody that binds to SEQ ID NO:1 at least once or at one or more intervals of less than N weeks;
 - (b) temporarily discontinuing the administration of step (a) for N weeks or longer; and
- (c) repeating steps (a) and (b) at least once; thereby inhibiting generation of pathogenic B cells, and wherein N is 8, 9, 10, 11, or 12.
- 33. (Original) The method of claim 32, wherein the pathogenic B cells are $IgM^{-}IgD^{+}$.

34 - 70. (Cancelled)